

**SAN MATEO COUNTY COASTSIDE MEDICAL RESERVE CORPS
VOLUNTEER APPLICATION**

Please Print- All Data is Confidential

Name	
Home Address	
Home City/Zip	
Home Phone	
Pager Number	
Cell Phone Number	
E-mail	
Work Address	
Work City/Zip	
Work Phone	
Hospital Affiliation	
Academic Affiliation	
Military Experience	
Professional Title (MD, RN, EMT, etc)	
Professional License Type and Number	

Professional License Expiration Date	
Special Skills	
Other Information	
Signature	
Date of Application	

Note: All information on this application will be considered confidential and privileged. It will only be used for MRC purposes and will only be shared with those agencies with a “need to know” status (such as the Fire Department and San Mateo EMS agency).

Please send completed applications to:

J. Kent Garman, MD, MS
 Director
 54 Spyglass Court
 Half Moon Bay, CA 94019

For more information about the MRC program and downloadable applications, go to:

<http://homepage.mac.com/jkgarman/mrc.htm>